



**TORONTO  
ORTHOPEDIC  
HOSPITAL**

**Presented with the Compliments  
of the Trustees**

**Decennial Report**  
**1898-1908**



**The only Institution in Canada devoted exclu-  
sively to the Treatment of the Lamé,  
Ruptured, Crippled and Deformed.**

This Report is sent out by the Trustees of the Toronto Orthopedic Hospital for the purpose of supplying information concerning the good work the hospital is doing for the benefit of humanity, and with the hope of arousing the interest of any who may feel disposed to aid this work in some practical way.



The Toronto Orthopedic Hospital is supported:

- I. By the fees paid by patients for maintenance and nursing;
- II. By a yearly grant from the Ontario Government; and
- III. By donations from those who are in sympathy with the desire of the Trustees to place all the benefits of the institution at the command of the worthy poor.

**Donations or bequests are very acceptable and receive prompt acknowledgment.**

**Annual subscriptions of amounts from \$1.00 upward are a very welcome source of income. Would you not like to become an annual subscriber?**

The demands upon the charitable resources of the Hospital are constantly increasing, and an endowment fund must be established if the future needs of the great work which has been undertaken are to be provided for.

Private wards are furnished for private patients.

Wards at less expense for those of limited means.

Wards for the poor, where no charge is made for professional service.

# Toronto Orthopedic Hospital.

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450

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### Active Staff:

*Senior Surgeon and Superintendent:* DR. B. E. MCKENZIE.

*Surgeon:* DR. S. M. HAY.

*Assistant Surgeon:* DR. EDGAR ALLIN.

### Consulting Staff:

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DR. R. J. WILSON.

DR. JENNIE GRAY.

DR. A. H. PERFECT.

DR. HENRY A. BEATTY.

### Consulting Physicians:

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DR. W. J. WILSON.

DR. GEO. D. PORTER.

DR. C. M. FOSTER.

DR. ALLAN SHORE.

DR. JAS. G. CAVEN.

*Consultant on Diseases of the Eye and Ear:* DR. L. LORAN PALMER.

*Consultant on Diseases of the Throat and Nose:* DR. PRICE BROWN.

### Anesthetists:

DR. R. A. STEVENSON.

DR. W. W. OGDEN.

### Pathologist:

DR. GEO. H. CARVETH.

### Dentist:

DR. HORACE E. EATON

### Director of Gymnasium:

MISS AUGUSTA OOTHOUT.

### Instructor in Massage:

MISS M. PLUNKETT CAMPBELL.

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# Toronto Orthopedic Hospital

Decennial Report, 1898-1908.

The Toronto Orthopedic Hospital was founded in 1898. The first Board of Trustees consisted of widely known, public spirited gentlemen, who have since that time passed away. They were: Rev. John Potts, D.D., who was elected President of the Board; Judge MacDougall, Warring Kennedy, Rev. Frank Ryan, and Rev. John Gillespie. A little later Mr. Timothy Eaton came upon the Board and assisted both financially and by his counsel in establishing the Hospital. These gentlemen, though busily occupied with important concerns in their own spheres, yet gave much time and effort to interest the public in the purpose and needs of the work. Finding that no institution existed in Canada designed and equipped especially for the care and treatment of persons lame, crippled and deformed, and that many of such were going away to cities in the United States for treatment, they undertook to provide the means whereby all persons—rich or poor, in childhood or maturity—so afflicted could have the advantages of such modern learning and surgical art as are required in the treatment of this difficult class of cases. It meant much more than providing a site and a building, as the work could not be accomplished as in a hospital for general diseases, but it required special equipment, as shown in future pages.

An appeal to their friends, resident chiefly in Toronto, resulted in procuring the present property on Bloor street, and in building and equipping it for its special work at a cost of nearly \$50,000.

The Hospital has entered upon the tenth year of its history. The Trustees consider it an opportune time for reviewing the work done and for laying emphasis upon the unique place which it occupies among Canadian philanthropic institutions. The Hospital is designed to alleviate a very distressing class of ailments, and not only to free suffering ones from their afflictions, but to render them more efficient for the performance of life's work. Illustrations shown in this report are chosen as representative of hundreds of persons who have been rescued from a condition in which life was found to be a burden, and restored to one of activity, confidence and happiness; from one of almost hopeless disability to one of busy usefulness. Young persons so disabled by paralysis and deformity as to be entirely unable to walk, have been restored to a degree of activity which made life a renewed delight, and enabled the individual to take up duties and responsibilities necessary to a livelihood. Hundreds more who were burdened by greatly disfiguring deformities—some of whom had carried their burdens half a life time, not knowing previously that relief could be obtained—have been so completely restored to normal conditions that the disability is not observed by those who had not known them previously.

The fact that it is the only hospital in Canada whose equipment and efforts are designed exclusively to cure or benefit persons who are lame, ruptured, crippled or deformed, gives it a place peculiar to itself. In harmony with the great general advancement made in medical science, orthopedic surgery, by specializing in the attention given to this most difficult class of affections, has provided means of treatment, and has attained results which could not otherwise be secured.

It is chiefly among the young that this work is called for, yet the number of disabled persons in adult life presenting themselves for treatment is found to be nearly as great as the number under *Forty* years of age.



A Ward For Children.

Our citizens have always shown commendable interest and zeal in all questions which concern the public welfare, and the Trustees desire to make known more fully the good work which may be done for an unfortunate class of persons whose condition has too often been looked upon as hopeless. The experience of the years which have elapsed since the organization of the Hospital has brought to light many persons who had previously thought that there was no prospect of betterment; hence, in presenting this report to the public they are desirous not only of securing a larger financial support in order that they may be able to deal more liberally and generously with the poor, but they purpose to bring the special advantages afforded by the Hospital to the attention of all who are in any way disabled or suffering from the class of afflictions which this Hospital is specially intended to alleviate. Provision has been made for the care of both rich and poor. While none of the wards are large (the largest having but eight beds), and while all patients are nursed with the utmost care and consideration, yet special wards are provided and elegantly furnished for those who may wish to have private ward accommodation. There is also an intermediate class of wards known as semi-private, where two or three persons may occupy the same room at a moderate cost. Patients are considered as coming under one of three classes:



A Private Ward.

First, private patients, who may have splendidly furnished wards and private accommodation in every particular. Such wards can be furnished at a sum varying from \$12 to \$20 per week.

Second, semi-private patients, occupying well-lighted, well-furnished, comfortable wards, where two or three persons may occupy the same room. These wards are provided at a cost varying from \$8 to \$12 per week.

Third, free patients, who do not pay for surgical attendance, but pay for hospital maintenance and service such an amount as their financial circumstances may warrant.

The surgical fees for private and semi-private patients is a matter to be arranged entirely with members of the surgical staff. Those admitted as free patients will pay no fee for surgical attendance. Referring to this latter class, the Trustees wish to call the special attention of generously disposed persons to the fact that the demand upon the Hospital's service and equipment is greater than their funds will enable them to meet, and consequently that they are not able to deal as liberally with this class of persons as they desire to do. The greatly increased cost of living is making itself felt in hospital wards as elsewhere, consequently a more liberal support is called for on the part of the friends of the Hospital in order that the needs of the poor may be successfully and generously met.

#### OUT-PATIENT CLINIC.

An out-patient clinic every day except Sunday, at one o'clock, is maintained for the poor. Such patients may receive advice and treatment free of charge and when found necessary their admission to the Hospital may be arranged for.





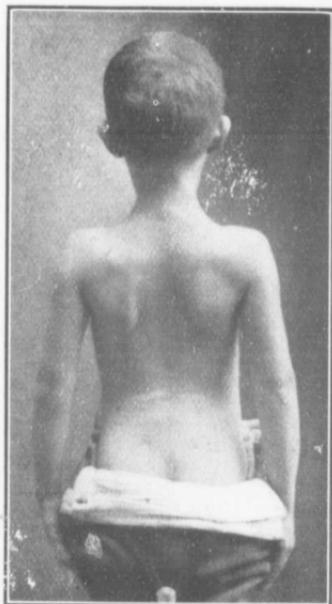
#### CLUB-FOOT.

Not many deformities cause more anxiety to parents than that of crooked feet at birth. The mother who looks upon her babe for the first time and sees this condition is greatly shocked and worries over the matter for months. The adult who still has the feet so deformed is often treated as an outcast, is refused opportunities to work for a living which are open to more fortunate competitors, and frequently regards himself as of a lower order than his fellows. The experience of such persons is most pitiable.

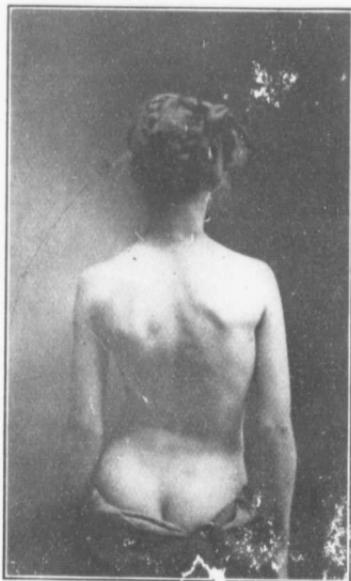
Fortunately, this condition is one most favorable for treatment. When treatment is undertaken in childhood and efficiently carried out the cure should be such that no one can in after years detect any defect or disability. In order to secure such an ideal result so that the feet may be brought to a normal state, both in form and usefulness, it is necessary to employ operative treatment, mechanical means, and physical training. Such good results may be secured even in late childhood. In adult life the natural form of the feet may be restored, but the activity of the patient will fall below the normal standard. Successful results have been obtained in patients more than forty years of age, and one may confidently anticipate results that are highly satisfactory in childhood, youth, or early mar...ood.



Curvature of Spine, Following Paralysis.



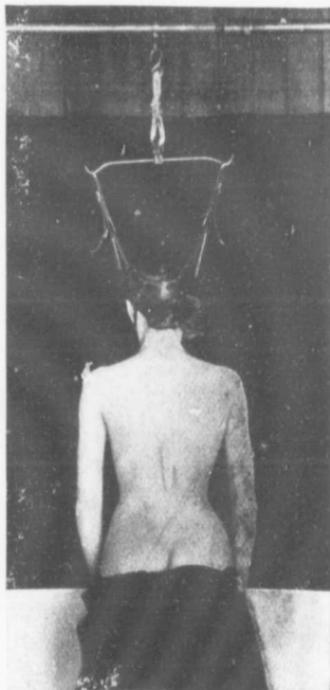
Same Boy One Year later.



Showing Improvement Resulting from Training



Natural Attitude.



Same Showing Effect of Suspension  
in Orthopedic Gymnasium.

#### CURVATURE OF THE SPINE.

Curvatures of the spine are of two kinds. One is the result of serious disease, and is in itself a very serious affection, which may end fatally; the other may be present without disease, and, though prejudicial to health, is objectionable chiefly because of the deformity. The figure is not symmetrical and erect, but uneven and bent to one side or the other. The spinal deformity, which results from disease must have rest, constant and long-continued; must have the best care and provision in the way of fresh air, sunlight, good food, etc. Operations, too, are sometimes called for. The large southern exposure of the Hospital, its spacious verandahs, and its provision for living in tents, are intended to meet the needs of these patients. The curvatures which are of the less serious kind need especially such care and treatment as may be given by physical training. To meet the needs of these patients an Orthopedic Gymnasium is provided, specially equipped and directed by a competent instructor, who, under the direction of the surgeon, is present every day to carry out his instructions in treatment and to guide and direct the patient in the best methods for regaining an erect figure, good development of heart and lungs, proper methods of breathing, and proper development for those muscles most in need of the same.



Deformity at Knee From Accident.



Deformity Corrected.



Deformity at Ankle From Accident.



Deformity Improved.



Deformity from Hip Disease.



Same corrected.

#### DEFORMITIES FROM ACCIDENTS.

There are many cases of serious disability from accidents and other injuries, and not infrequently deformity is an accompaniment.

On the preceding page is shown an illustration showing a boy whose ankle had been cut by a mowing machine. Afterwards for several years, as he grew, the foot and leg became more and more deformed. An operation was necessary to correct the deformity and to prevent its recurrence, as shown in the illustration.

One of the most frequent causes of lameness of the kind referred to is fracture of the bones, especially when near joints. If the healing after injury leaves a short or crooked limb, or causes the foot to be held in a wrong position—not infrequently the case—it may become necessary to correct the disabled conditions. Sometimes by operative means and sometimes by mechanical aids, the parts may be restored and freedom and ease of action entirely regained or greatly improved.



#### OPERATING ROOM.

Many of the affections requiring treatment render necessary surgical operations which can be done with safety only where complete operating-room facilities are provided and the attendance of trained nurses secured. The frequent necessity for such operative work in dealing with deformities, bone and joint diseases, etc., is seen in the fact that since the founding of the Hospital more than two thousand operations have been performed under anæsthesia. The operating room is thoroughly modern in its equipment, so that the requirements of the absolute cleanliness which is essential to modern surgery may be secured. It consists of a suite of five rooms: the operating room proper, where the floor is of stone and cement and the walls of marble and cement, which can be washed and kept in a thoroughly cleanly condition; of three smaller rooms adjoining, for the preparation of dressings, the preparation of the surgeon for operation, for the administration of anæsthetics, etc; and of a recovery ward, where the patients may be kept for some hours or days immediately after operation, both for their own comfort and for that of other patients.

#### X RAY MACHINE

A machine for X-Ray work has become an essential of every modern Hospital. Apparatus for this work is being installed, enabling the staff to render valuable service to the public and the profession in this important matter.



Indian Child. Club Foot.



Same Indian Child.



Bow-Legs.



Same as two preceding.  
Club-Foot and Bow-Legs Corrected.



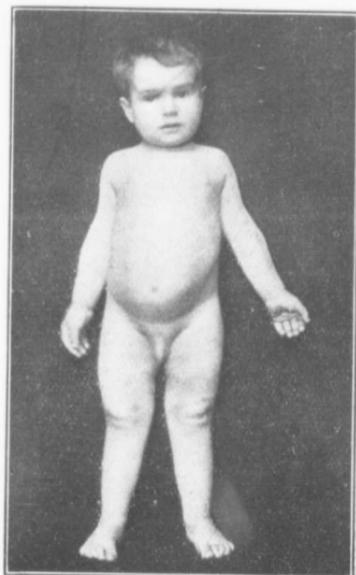
Wryneck.



Wryneck Corrected.



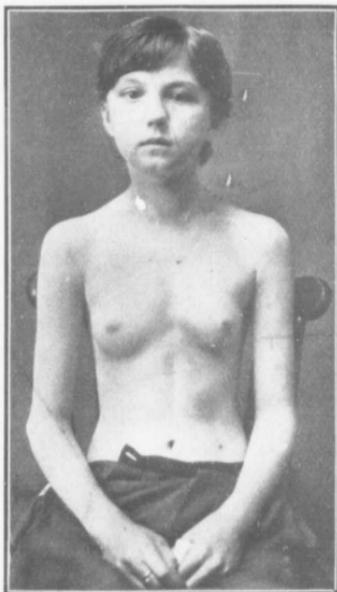
Knock Knees.



Knock Knees Corrected



Wry Neck



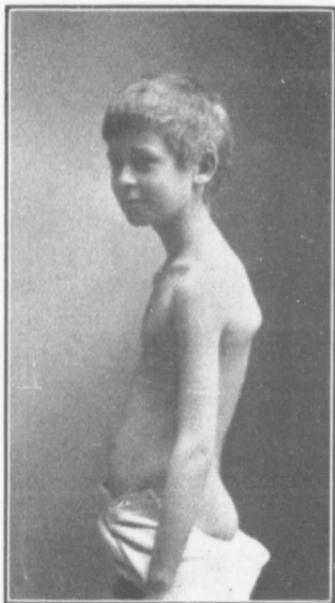
Wry Neck Corrected.

#### WRY NECK.

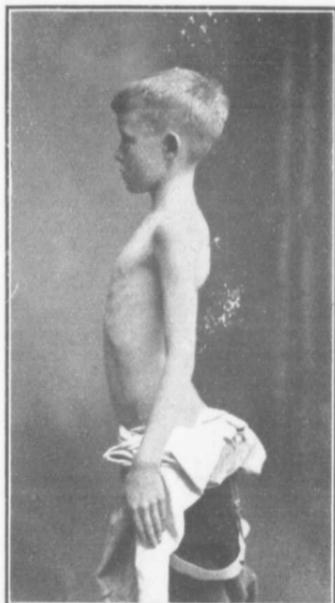
Wry neck, or torticollis, as shown in the foregoing cases is a distorted position of the head in which it is held habitually. As seen from behind it presents the appearance of a spinal curvature high up in the spine. It can seldom be cured without operation and operation should be followed by physical training in the Orthopedic Gymnasium if one is to obtain the best result possible. The operation is intended to free the muscles of the short side, and the training is needed to correct the wrong habitual position.

#### BOW LEGS AND KNOCK KNEES.

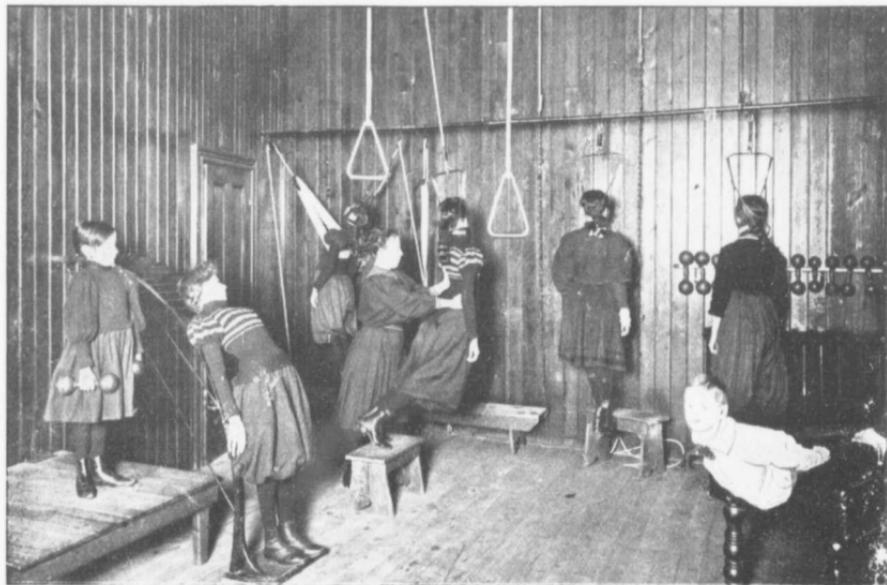
These deformities occur mostly in children, but are seen occasionally in the adult. The treatment will vary according to age, but in all cases should result successfully. In the adult, operation is always necessary; in children it is frequently required. In some instances mechanical treatment, massage and physical training are among the essential means for securing satisfactory results.



Before Gymnasium Training. Ordinary Attitude.



After Training.



Orthopedic Gymnasium.

#### MECHANICAL DEPARTMENT.

Following many of the operations, surgical appliances are necessary in order to secure the best results possible. However appropriate and well carried out the operation may have been in itself, the after treatment, extending over months and sometimes years, is quite as important as the operation, if one is to secure the best results obtainable. In many cases it is impossible to carry out treatment successfully or to hold out hope of recovery or improvement to the patient without the use of properly designed and constructed mechanical appliances. The great importance of this department of the work may be inferred from the fact that two well-equipped shops are maintained and constantly in operation. In the shop where leather work is done, chiefly in the making of properly constructed boots for the varying disabilities and painful affections of the feet, three specially trained mechanics are constantly employed. In the machine shop, fitted up with machinery sufficient for doing all of the work required by the Hospital, two machinists are constantly at work. At first only appliances required during treatment were made by our mechanics, but since the equipment for such work reached a high degree of efficiency, artificial limbs have also been made, which is found a great convenience.

It is not only a matter of great convenience to the surgeons upon whom rests the responsibility for seeing this work carried out efficiently, but it is absolutely necessary that they shall have immediate control of the work done by the mechanics if it is to reach ideal success. Appliances made somewhat at random by mechanics who are not directly under the control of the surgeon and who have no knowledge of anatomy or physiology, must fail in giving the degree of comfort, and in reaching the ideal of appropriateness to serve the required purpose. In all stages, from the time that the steel, leather or other material is purchased from the wholesale merchant until it is in a finished state so as to be used by the patient, the details of work are carried out in our own shops. Thus, under the guidance of the surgeon, trained mechanics must be employed, men of originality and capable of adapting the appliances to the special needs of any patient, however unusual the conditions, so as to meet the surgeon's requirements.

#### ORTHOPEDIC GYMNASIUM.

There is a large class of disabling affections which can be treated most successfully by developmental means. Physical training applied so as to meet special requirements holds a strategic place in this work, especially for the young. Cases of paralysis, weak or curved spines, weak and painful feet and round shoulders are among those successfully treated in a way that is found by the patients both interesting and agreeable. Not a few persons disabled and bed-ridden for months or years have thus been restored to normal activity. Some who have lost, absolutely, control over the lower extremities have been by means of training aided by the scientific use of mechanical appliances, restored to such a degree of activity as to be independent of the aid of other persons for moving about to perform the ordinary duties of life. Such persons are now able to move at will from place to place without the intervention of a wheel-chair or without calling upon anyone for assistance. Of the many achievements of medical and surgical science, probably none has been more striking than the gain in the way just indicated.

#### HERNIA

Persons who are ruptured may be successfully treated either by the use of a truss or by means of operation. In young persons a truss is employed not only to keep the rupture in place but often with a view to effecting a cure. This is often successfully accomplished by mechanical means alone. In an adult, however, and in some children, treatment by means of operation is much more satisfactory and effective.



Deformity from Bone Disease from Typhoid Fever.

Same Corrected.

## CLASSIFICATION OF DISEASES

Angular Deformity of Spine, Pott's Disease.....	245
Ankle-Joint Disease.....	59
Adenoids.....	1
Appendicitis.....	2
Bunions.....	11
Bow Legs.....	17
Club Foot, Congenital.....	378
Club-Foot, Flat-Foot and other Deformities resulting from paralysis, other than Spastic Paralysis.....	348
Congenital Elevation of Scapulae.....	2
Cartilage in Knee displaced or loose.....	18
Cleft Palate.....	3
Cerebro-Spinal Meningitis, Disability from.....	5
Congenital Syphilis.....	1
Deformity of Toe.....	10
Deformity or Disability resulting from Spastic Paralysis.....	79
Deformity from Rheumatoid Arthritis.....	43
Deformity of Fingers.....	16
Deformity or Disability resulting from Fracture.....	38
Deformity or Disability of Elbow-Joint.....	11
Dislocation of Shoulder, Congenital.....	1
Dislocation of Patallae, Chronic Double.....	2
Dislocation of Hip, Congenital.....	55
Disease of Jaw.....	1
Deformity of Ears.....	2
Flat-Foot, Non-paralytic.....	56
Fracture of Femur.....	10
Hernia.....	17
Hip-Joint Disease or Deformity.....	328
Hemiplegia.....	5
Infantile Paralysis.....	54
Knee-Joint Disease or Deformity.....	258
Knock-Knees.....	14
Lateral Curvature of Spine.....	159
Neuroses.....	42
Osteomyelitis.....	12
Pseudo-Hypertrophic Muscular Paralysis.....	1
Shoulder-Joint Disease.....	11
Sacro-Iliac Disease.....	3
Spina Bifida.....	2
Torticollis (Wry-Neck).....	16
Tubercular Foot.....	5
Wrist Disease.....	9
Dupuytren's Contracture of Hand.....	1
Ingrowing Toe-Nail.....	12
Miscellaneous Orthopedic conditions, including Sarcoma and other bone tumors, ununited fractures, contractures from burns and scalds, hare lip, varicose veins, etc.....	139

### A SPECIAL HOSPITAL.

No general diseases in either young or old are admitted. The work of the Hospital is special and all its work and equipment are designed to alleviate or cure those who are lame, ruptured, crippled or deformed. This fact is, in a large measure, an assurance of safety, as these patients are not so liable to become affected by contact with various contagious diseases as they would be if they were staying in a general hospital where patients afflicted with numerous diseases are admitted.

Although nearly ten years since the Hospital was opened and although more than two thousand operations have been performed, and there have been more than two thousand five hundred admissions, yet there have been only eleven deaths from all causes



Extreme Bowlegs in Adult.



Same After Operation.

#### THE TREATMENT OF ADULTS.

If all deformities were successfully treated in infancy and childhood there would not be many persons so afflicted in adult life, and now that the means are known to be so efficient and results so successful parents and philanthropists are paying more attention to the subject.

Still there are a large number of cases which do not occur till adult life. Hundreds who have attained to manhood or womanhood have been treated in the Orthopedic Hospital with success, and it may fairly be said that maturity is no insuperable obstacle to successful treatment. Especially has this proven to be the case in the treatment of deformities of the feet and in deformities resulting from accidents or from diseases of the various joints. Many adults who suffer from deformity such as a crooked knee or a short limb resulting from joint trouble, possibly in childhood, have had such improvement as a result of operation as to find themselves afterward but little hampered in performing the ordinary duties of life, or to appear but to little disadvantage compared with their somewhat more fortunate associates.

#### WEAK ANKLES AND FLAT FEET

"Weak ankles" is a troublesome condition seen frequently in childhood. It is sometimes due to weakness existing from birth, but often the trouble is dependent largely upon improper boots and improper habits in using the feet. To remedy the condition two methods are available: One to train the child to use the feet properly and to develop the muscles designed to hold the feet in their normal place; and the other, to have shoes correctly designed and so constructed as to keep the feet in a correct position. The condition of weak ankles, if neglected, tends to produce weak feet, commonly spoken of as "flat foot." The personal tendencies in this direction are greatly accentuated by the wearing of improper boots.

## CONDENSED FINANCIAL STATEMENT

### RECEIPTS

Maintenance and Nursing.....	}	
Massage.....	}	
Gymnasium.....	}	\$61,510.98
Board.....	}	
Manufacturing Department.....		33,864.95
Government Grant.....		10,454.24
Donations (other than to Building Fund).....		4,611.98
Temporary Loans.....		4,823.52
Mortgage Loan.....		12,000.00
Subscriptions and Donations to Building Fund..		28,342.67
Ladies' Furnishing Fund.....		4,019.77
		\$1 5,628.11

### EXPENDITURES

Food.....	\$16,578.40
Medical and Surgical Appliances and Surgical Instruments.....	4,910.56
Bedding, Napery and General Furnishing.....	2,371.18
Salaries, Wages for Hospital and Gymnasium...	22,076.81
Cleaning Supplies.....	540.70
Fuel, Light, Water and Ice.....	8,344.89
Contingencies—Clothing for nurses and patients, etc.....	3,830.07
Repairs and Improvements.....	6,760.73
Taxes, Insurance, Rent, Telephone and Interest	4,869.17
Printing, Stationery, Postage.....	3,603.65
Buildings.....	50,027.37
Furniture.....	3,356.92
Manufacturing Department.....	31,717.66
	\$159,628.11

### REPORT OF LADIES' COMMITTEE.

Since its organization the Ladies' Committee has undertaken the furnishing of the wards, and the general "household" arrangements of the Hospital.

Money has been raised to further this work of Committee by concerts, lectures, and various entertainments. Special donations have been given by interested friends and these are always most acceptable. Several friends have contributed annual donations, and we would be glad to add to the number, thus securing a regular income from this source.

Monthly meetings are held in the Library of the Hospital, and here plans are made for the good cheer and comfort of the patients, and nurses, and others who are assisting in the work of the staff.

Very gratefully we desire to acknowledge the kindness and the co-operation which has made possible not only the beautifying of the Hospital and its more complete equipment, but which has frequently added to the joy and gladness of the sufferers who are being helped back to strength again.

### FINANCIAL REPORT FOR 1905-7.

Receipts.....	\$1,089.20
Expenditures.....	686.98
	\$402.22

Cash in Bank.....

ANNIE L. MACDONALD,  
Secretary.



#### TENTS.

In the care and treatment of tuberculosis no factor has been more potent for good in recent years than provision whereby the patient can have the full benefit of fresh air and sunlight. To insure the most favorable conditions for patients afflicted with tuberculosis of the joints while in the Hospital, tents are employed where these patients stay at night, being taken out directly into the sunshine on all suitable days. Exposure for a few hours at a time is not sufficient; as nearly as possible the patient afflicted with these affections such as hip disease, spinal disease, and other tubercular joint affections, must live in the sunshine, and arrangements should permit direct exposure of the diseased part to the sun without the intervention of clothing. The sun must reach the parts as directly as it reaches the growing grain or grass. It is necessary at the same time that the diseased part be fully protected from any movement. For this purpose a cot specially designed for the patient is employed, permitting easy removal from place to place without any way disturbing the patient or permitting movement at the affected joint. The results obtained by treatment long-continued and constantly carried out in this manner are much better than those obtained by former methods.

#### SCHOOL OF MASSAGE

A School of Massage is conducted, there being two courses each year. One from February 1st till the end of June; the other from September 1st till the end of January. The patients in the Hospital afford abundant material for obtaining a practical knowledge of the subject. Especially for patients afflicted with nervous disease, massage is found a valuable means of treatment, and is increasing in popularity with the medical profession. For particulars regarding the Training School for Nurses or the School of Massage, apply to the Lady Superintendent.



No Thigh Bone Present



Artificial Substitute



Same Person as in Foregoing Cuts

## INFANTILE PARALYSIS

The affection known as Infantile Paralysis is of relatively frequent occurrence in childhood and varies greatly in the extent of lameness which it causes. The most prominent features of the affection are not seen when the child is first ill and probably helpless. It is when the sickness seems to have passed away and the child is expected to get up and resume its normal activity that the parents and friends experience the greatest disappointment. Weeks or months are likely to elapse before the child can walk again and in the most severe variety there very commonly follows slowly increasing deformity which becomes offensive to the sight and disabling to the patient. In the worst cases loss of power may be complete in one or more limbs, so that some of these patients never walk again without the aid of most modern means to assist in regaining a degree of activity.

In all cases means may be employed which will greatly assist toward recovery; but as the degree of disability varies very greatly so the means employed must be various. In no case can the degree of recovery so nearly approach the normal state as when there is only deformity to overcome and no paralysis. By the various means, however, at the disposal of the surgeon much improvement may be effected and in many patients a condition closely approaching the normal may be reached.

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## TRAINING SCHOOL FOR NURSES

A staff of nurses is constantly employed and nurses are taken in training. The course comprises practical nursing under the direction of a competent Lady Superintendent. Courses of lectures in anatomy, physiology, administration of medicines, effects of poison, bandaging, etc. On completion of the required term of two years, and after passing the required examinations, a diploma is granted.

Upon application the services of a male or a female nurse may be secured who is also competent to give massage, seeing that all our nurses take the course in massage.

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## PROFESSIONAL CHARGES

The Hospital Board does not pay for any surgical service. Patients may make their own arrangements with members of the staff concerning the matter of payment. Free patients pay no fees to any member of the staff for surgical attendance.

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## HOSPITAL OPEN TO ALL REGULAR PRACTITIONERS

The Hospital's equipment and service are at the disposal of every regular practitioner of medicine and surgery, for the treatment of those who are lame, crippled, ruptured, or in any way deformed. In case any operation is required it will be necessary to have the advice and approval of some member of the regular active staff.

The net cost to the Hospital for each patient in its wards is \$8.00 per week, hence when practitioners not appointed on the Hospital's regular active staff of surgeons send patients into the Hospital to keep them under their own personal supervision it will be necessary that the patient pay at least the sum of \$8.00 per week for maintenance and nursing.

## The Hospital's Urgent Needs



1. More liberal support to enable the Trustees to deal still more generously with the poor.—*Contributions to the Poor Fund.*
2. A building for a nurses' home on land now owned by the Trustees.
3. Contributions to enable the Trustees to pay off the present indebtedness of about \$20,000.00.



*N.B.--Keep this report for reference or place it in the hands of someone interested.*

*Trinity Mission House, Toronto, 1888*



TORONTO ORTHOPEDIC HOSPITAL, 100 WEST BLOOR STREET.